UNITED STATES SECURITIES AND EXCHANGE COMMISSION SEC Mail Processing Washington, D.C. 20549

Section

FORM D

OCT 08 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. Washington, DC **SECTION 4(6), AND/OR** 110 UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response 16.00

SEC USE ONLY							
Prefix	Serial						
DATE R	RECEIVED						

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Class C Interests Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) Ivy Defenders Fund, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) One Jericho Plaza, Jericho, NY 11753 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code) (if different from Executive Offices)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) Ivy Defenders Fund, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) One Jericho Plaza, Jericho, NY 11753 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (516) 228-6500 Telephone Number (Including Area Code)
Type of Filing:
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Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
40.400
YEAR PROCESSED
Brief Description of Business Limited Partnership is an investment limited partnership. 0CT 1 5 2008
UCI 1 3 2000
Type of Business Organization TUON ACONI DELITE
Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☐ other pressure specific.
□ business trust □ limited partnership, to be formed
Month Year
Actual or Estimated Date of Incorporation or Organization: 0 6 9 9 🗹 Actual 🗆 Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service
abbreviation for State; CN for Canada; FN for other foreign jurisdiction) N Y

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control num



A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Defenders Management, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) One Jericho Plaza, Jericho, NY 11753
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
*Manager of the General Partner
Full Name (Last name first, if individual)
Ivy Asset Management Corp.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Jericho Plaza, Jericho, NY 11753
Check Box(es) that Apply: ☐ Promoter *☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
*of the Manager of the General Partner
Full Name (Last Name first, if individual)
The Bank of New York Mellon Corporation
Business or Residence Address (Number and Street, City, State, Zip Code)
One Wall Street, New York, NY 10286
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner *☑ Executive Officer ☐ Director ☐ General and/or Managing Partner *of the Manager of the General Partner
Full Name (Last Name first, if individual)
Davies, Stuart
Business or Residence Address (Number and Street, City, State, Zip Code)
One Jericho Plaza, Jericho, NY 11753
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner *☑ Executive Officer *☑ Director ☐ General and/or Managing Partner Of the Manager of the General Partner
Full Name (Last Name first, if individual)
Simon, Sean .
Business or Residence Address (Number and Street, City, State, Zip Code)
One Jericho Plaza, Jericho, NY 11753
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner *☑ Executive Officer *☑ Director ☐ General and/or Managing Partner
*Of the Manager of the General Partner
Full Name (Last name first, if individual)
Singer, Michael
Business or Residence Address (Number and Street, City, State, Zip Code)
One Jericho Plaza, Jericho, NY 11753

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	*☑ Director .□	General and/or	Managing Partner
of the Manager of the General Partner	5.		· San San San
Full Name (Last Name first, if individual)			·
Noris, Peter			
Business or Residence Address (Number and Street, City, State, Zip Code)	•		
One Jericho Plaza, Jericho, NY 11753			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner *☑ Executive Office	er Director	☐ General and	d/or Managing Partner
*Of the Manager of the General Partner			
Full Name (Last name first, if individual)			
Sebetic, Paul			
Business or Residence Address (Number and Street, City, State, Zip Code)			
One Jericho Plaza, Jericho, NY 11753			

(use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. IN	FORMAT	ION ABO	UT OFF	ERING						
													Yes	N	lo
1.	Has the iss	suer sold.	or does th	e issuer in	tend to sel	l. to non-a	ccredited i	nvestors	in this offe	ring?				6	7
• • • • • • • • • • • • • • • • • • • •		,					ın 2, if filir							_	_
2.	What is th	e minimu					any indivi	_					\$	500,000	.00
						•	subscription								·····
						•	•						Yes	N	lo
3.	Does the o	offering ne	ermit inint	ownershir	o of a cino	le unit?							. v3 [₹]		
J.	Does the C	ntering pe	anni jonii	Ownersing	or a sing	ic ullit:					*************	******		_	-
4.	Enter the	informatic	on request	ed for eac	h person	who has b	een or wil	l be paid	or given.	directly o	r indirectl	v. anv			
••			_		-		rchasers i	_	_	-					
	offering.														
							If more th								
							ormation fo	•							
					•					•					
Full N	ame (Last r	name first,	if individ	ual)					•					-	
Citigr	oup Globa	l Market,	Inc.				•								
Busine	ss or Resid	lence Add	ress (Num	ber and St	treet, City,	State, Zip	Code)								
388 G	reenwich S	treet, 16 ^t	Floor, N	ew York,	NY 1001	3									
Name	of Associat	ed Broker	or Dealer	r											
												- :			
	in Which P											·	-		
,	ck "All Stat				•								☑ All S	states	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[Al]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]			
Full N	ame (Last r	name first,	if individ	ual)											
Busine	ess or Resid	lence Add	ress (Num	iber and St	reet, City.	State, Zip	Code)								
Name	of Associat	ed Broker	or Dealer	ſ											
States	in Which P	erson List	ed Has So	licited or	Intends to	Solicit Pu	rchasers								
	ck "All Stat													States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[он]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[wij	[WY]	[PR]			
Full N	ame (Last r	name first,	if individ	ual)											
							~								
Busine	ess or Resid	lence Add	ress (Num	iber and Si	reet, City.	, State, Zip	(Code)								
Name	of Associat	ed Broker	or Dealer	Γ											
	in Which P						rchasers								
•	ck "All Stat													States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[M]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box □ and indicate in the

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	. s	s
Parife	•	
Equity Preferred	. 3	s
Convertible Securities (including warrants)	. s	s _
Partnership Interests (Class C)		\$ 660,491,689.00
Other (Specify)		¢
Total	. \$ <u>1,000,000,000.00</u>	\$660,491,689.00
aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of person have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if a is "none" or "zero."	-	Aggregate Dollar Amount of Purchases
Accredited Investors	. <u>-589-</u>	\$ <u>674,111,427.00</u>
		
Non-Accredited Investors		s
Non-Accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE		ss
Total (for filings under Rule 504 only)	by the ities in NOT APP	PLICABLE
Total (for filings under Rule 504 only)	by the	PLICABLE
Total (for filings under Rule 504 only)	by the ities in NOT APF	
Total (for filings under Rule 504 only)	by the ities in NOT APF	PLICABLE
Total (for filings under Rule 504 only)	by the ities in NOT APF	PLICABLE Dollar Amount Solo S
Total (for filings under Rule 504 only)	by the ities in NOT APF	PLICABLE Dollar Amount Solo S
Total (for filings under Rule 504 only)	by the ities in NOT APF	PLICABLE Dollar Amount Sol
Total (for filings under Rule 504 only)	by the ities in NOT APF Type of Security in this e given	PLICABLE Dollar Amount Sol
Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities offering. Classify securities by type listed in Part C Question 1. Type of Offering Rule 505	by the ities in NOT APF Type of Security in this e given I check	PLICABLE Dollar Amount Sol
Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities offering. Classify securities by type listed in Part C Question 1. Type of Offering Rule 505	by the ities in NOT APF Type of Security in this e given check	PLICABLE Dollar Amount Solo S
Total (for filings under Rule 504 only)	by the ities in NOT APF Type of Security in this e given I check	Dollar Amount Solo S S S S
Total (for filings under Rule 504 only)	by the ities in NOT APF Type of Security in this e given I check	Dollar Amount Solo S S S S 3,000.00
Total (for filings under Rule 504 only)	by the ities in NOT APF Type of Security in this egiven check	Dollar Amount Solo S S S S 3,000.00
Total (for filings under Rule 504 only)	by the ities in NOT APF Type of Security in this egiven check	Dollar Amount Solo S S S S 3,000.00

^{*}Commissions are based on a percentage of assets raised by the broker.

ъ.	Enter the difference between the aggregate of and total expenses furnished in response to Pagross proceeds to the issuer."	ffering price given in response to Part C - Que: art C — Question 4.a. This difference is the "a	adjuste	ed	999,	968,000.00
5.	each of the purposes shown. If the amount f	ross proceeds to the issuer used or proposed for any purpose is not known, furnish an estimotal of the payments listed must equal the a Part C — Question 4.b above.	iate an	d check		
				Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of	f machinery and equipment		s .		\$
	Construction or leasing of plant buildings an	d facilities		s		\$
	Acquisition of other business (including the this offering that may be used in exchang another issuer pursuant to a merger)	e value of securities involved in e for the assets or securities of		\$	0	s
	Repayment of indebtedness			S		\$
	Working capital			\$	Ø	\$ 999,968,000.0
	Other (specify):			\$		\$
	Column Totals			\$	Ø	\$ 999,968,000.0
	Total Payments Listed (column totals added)		☑ \$_999,9	68,0 <u>0</u>	<u>0.00</u>
		D. FEDERAL SIGNATURE				
_		the sheet of control delicens the mined more	. If 1)	nic natice is filed und	ar Dul	a 505, the following
si	he issuer has duly caused this notice to be sign gnature constitutes an undertaking by the issue aformation furnished by the issuer to any non-a	er to furnish to the U.S. Securities and Exchar	ige Co	mmission, upon writt	er Kur	quest of its staff, the
	Issuer (Print or Type)	Signature	Da	ate		
	Ivy Defenders Fund, L.P.	MMn X				
	Name of Signer (Print or Type)	Title of Signer (Print or Type)			•	
	Kenneth R. Marlin	Managing Director, Legal and Compl Manager of Defenders Management,			agem	ent Corp.,

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

5.

 E. STATE SIGNATURE	
 R-262 presently subject to any of the uch rule? *	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to the state administrators of any state in which this notice is filed, a notice on Form D (17 CFR-239:500) at such times as required by state law.*
- 3.—The undersigned issuer hereby-undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.*
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.*
- *Items 1, 2, 3 and 4 above have been deleted pursuant to the National Securities Market Improvement Act of 1996.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

lssuer (Print or Type) lvy Defenders Fund, L.P.	Signature	Date 7/23/08
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Kenneth R. Marlin	Managing Director, Legal and C Manager of Defenders Manager	Compliance of Ivy Asset Management Corp., ment, LLC, General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

==				·	PPENDIX							
1	2	2	3		4		<u></u>	5	;			
	Intend to sell to non-accredited investors in State		Type of security and aggregate offering price offered in state	and aggregate offering price offered in state		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	(Part C-Item 1) Class C Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	(Part E	No			
AL		X	1,000,000,000.00	4	3,500,000.00							
AK												
AZ		X	1,000,000,000.00	2	750,000.00							
AR		X	1,000,000,000.00	2	4,583,333.00							
CA		X	1,000,000,000.00	62	96,427,859.00							
CO		X	1,000,000,000.00	5	3,235,754.00							
CT		X	1,000,000,000.00	17	13,770,505.00				<u> </u>			
DE		X	1,000,000,000.00	7	10,762,879.00							
DC		X	1,000,000,000.00	6	15,000,445.00				ļ			
FL		X	1,000,000,000.00	78	51,445,380.00							
GA		X	1,000,000,000.00	6	10,528,865.00				ļ			
HI												
ID	<u> </u>	<u> </u>							<u> </u>			
IL	.,.	X	1,000,000,000.00	20	21,722,227.00				 			
IN		X	1,000,000,000.00	3	31,000,007.00				ļ			
IA		X	1,000,000,000.00	1	500,000.00		<u>.</u>		<u></u>			
KS		X	1,000,000,000.00	1	500,000.00				<u> </u>			
KY		X	1,000,000,000.00	3	1,538,999.00							
LA									<u> </u>			
ME		X	1,000,000,000.00	1	500,083.00				1			
MD		X	1,000,000,000.00	10	4,364,114.00				 			
MA		X	1,000,000,000.00	14	22,023,507.00				 			
MI		X	1,000,000,000.00	3	2,000,070.00							
MN		X	1,000,000,000.00	1	1,000,000.00				<u> </u>			
MS									<u> </u>			
MO		X	1,000,000,000.00	4	8,351,571.00				<u> </u>			
MT				<u> </u>					<u> </u>			

					APPENDIX	— ·····				
1	:	2	3 4					5		
	non-acc invest St	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Class C Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No	
NE	ļ	_		_						
NV		X	1,000,000,000.00	8	9,900,033.00			 		
NH				- 11			·	ļ		
NJ		X	1,000,000,000.00	41	36,654,144.00					
NM		X	1,000,000,000.00	3	2,458,746.00		·			
NY		X	1,000,000,000.00	170	185,117,271.00					
NC		X	1,000,000,000.00	4	2,500,181.00			-		
ND	ļ	37	1 000 000 000 00	2	1 7 10 103 00					
OH		X	1,000,000,000.00	3	1,740,103.00					
OK	ļ. — —	X	1,000,000,000.00	2	6,451,756.00					
OR		v	1 000 000 000 00	10	12 0/2 2/2 00		·	-		
PA		X	1,000,000,000.00	10	13,862,363.00				···	
RI SC	-									
SD		X	1,000,000,000.00	1	2,310,172.00					
TN			1,000,000,000.00	ı ı	2,310,1/2.00		· ·		 	
TX		X	1,000,000,000.00	33	38,034,644.00					
UT			1,000,000,000,00	33	20,024,044.00					
VT	 					 	· · · · · · · · · · · · · · · · · · ·	 	\vdash	
VA		X	1,000,000,000.00	6	12,423,286.00			-		
WA	 	X	1,000,000,000.00	44	48,227,478.00			- 	 	
WV	 	X	1,000,000,000.00	2	2,500,014.00					
WI			-,2-1,2-1,0-0,0		-,,,					
WY		X	1,000,000,000.00	2	3,350,028.00		<u>.</u>	<u> </u>		
PR	· · · · · ·		, ,				·	··· -		

